



Medicare Advantage - Partial or Complete Worksheet

Listed below are the most frequently used Co-Pays

Basic \$0 HMO-POS / HMO / PPO	
PCP Visit	\$
Specialist	\$
Urgent Care	\$
Emergency Room	\$
Ambulance	\$
In Patient Hospital	\$ Days 1 -
Skilled Nursing	\$ Days 1 - 20
	\$ Days 21 -
Home Healthcare Not Included	

\$ Partial Plan Coverage	
PCP Visit	\$
Specialist	\$
Urgent Care	\$
Emergency Room	\$
Ambulance	\$
In Patient Hospital	\$ Days 1 -
Skilled Nursing	\$ Days 1 - 70
Home Healthcare Not Included	

* Use GTL Advantage Plus or Medico Hospital Indemnity

\$ Complete Plan Coverage	
PCP Visit	\$
Specialist	\$
Urgent Care	\$
Emergency Room	\$
Ambulance	\$
In Patient Hospital	\$ Days 1 -
Skilled Nursing	\$ Daily
Home Healthcare	
Up to 24 hours of Daily Home Care	
\$120 Per Day Home Aide	
Up to \$450 Daily Benefit Amount	
Includes Prescription Drug Benefit	
Paying you up to \$600 per year	

* Use GTL Short Term Care

Agent Name: _____ Phone: _____

